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pplication. The requested extension a	Application No For METHOL CATALY Art Unit 1754	/STS Examiner William G. Wright	Filed September 25, 2001 CA SUPPORTED, CRUSH-RESISTANT	
his is a request under the pplication.	For METHOL CATALY Art Unit 1754	D FOR MAKING SILIC 'STS Examiner William G. Wright		
his is a request under the pplication.	CATALY Art Unit 1754	/STS Examiner William G. Wright	CA SUPPORTED, CRUSH-RESISTANT	
his is a request under the pplication. The requested extension a	1754	William G. Wright		
his is a request under the pplication. The requested extension a	e provisions of 37 CFR 1.13			
· <u> </u>		o(a) to exterio the pent	od for filing a reply in the above identified	
-	and appropriate non-small-e	entity fee are as follows	s (check time period desired):	
One month	(37 CFR 1.17(a)(1))		\$ <u>110</u>	
☐ Two months	(37 CFR 1.17(a)(2))		\$	
☐ Three month	ns (37 CFR 1.17(a)(3))		\$	
☐ Four months	(37 CFR 1.17(a)(4))		\$	
☐ Five months	(37 CFR 1.17(a)(5))		\$	
Applicant claims smal one-half, and the resu	Il entity status. See 37 CFR	1.27. Therefore, the f	fee amount shown above is reduced by	
A check in the amoun	nt of the fee is enclosed.			
Payment by credit car	rd. Form PTO-2038 is attac	hed.		
☐ The Director has alrea	ady been authorized to char	ge fees in this applicati	ion to a Deposit Account.	
The Director is hereby Deposit Account Num	y authorized to charge any f nber 18-0250. I have enclos	ees which may be requeed a duplicate copy of	uired or credit any overpayment to this sheet.	
l am the 🔲 applica	ant/inventor.			
	ee of record of the entire into ed (Form PTO/SB/96).	erest. See 37 CFR 3.7	71. Statement under 37 CFR 3.73(b) is	
attorne	ey or agent of record. Regist	tration Number: 36,20	<u>1</u>	
☐ attorne	y or agent under 37 CFR 1.	.34(a). Registration nur	mber if acting under 37 CFR 1.34(a)	
WARNING: Inform this form. Provide	nation on this form may becor e credit card information and	me public. Credit card in authorization on PTG/2	information should not be included on 038.	
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610-407-0700			Christopher R. Lewis	
Telephone Number		7	Typed or Printed Name	
	CERTIFICATE OF	MAILING OR TRANSMIS	SSION	
mail in an envelope addresse to the U.S. Patent and Trader	ed to: Commissioner for Patent mark Office on the date shown	s, P.O. Box 1450, Alexand	stal Service with sufficient postage as first clas dria, VA 22313-1450, or facsimile transmitted	
Name (Print/Type) Christoph Signature	her R. Lewis	ato.	March 10, 2004	
Signature			ntative(s) are required. Submit multiple forms if more	
NOTE: Signatures of all the inven				
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than one signature is required, se "Total of forms are his collection of information is require rocess) an application. Confidentialit reparing, and submitting the complet quire to complete this form and/or st epartment of Commerce, P.O. Box 1	e submitted. ed by 37 CFR 1.136(a). The informatic ity is governed by 35 U.S.C. 122 and 3' ted application form to the USPTO. Tir uggestions for reducing this burden, sh	NOT SEND FEES OR COMPL	n a benefit by the public which is to file (and by the USPT estimated to take 6 minutes to complete, including gather e individual case. Any comments on the amount of time mation Officer, U.S. Patent and Trademark Office, U.S. LETED FORMS TO THIS ADDRESS. SEND TO:	

03/15/2004 HLE333